

ISSUE SLIP STAPLE AREA (for additional cross-references)

| ORIGINAL                     |          | CROSS REFERENCE(S) |                                   |  |  |  |  |  |  |
|------------------------------|----------|--------------------|-----------------------------------|--|--|--|--|--|--|
| CLASS                        | SUBCLASS | CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |  |  |  |  |  |  |
| INTERNATIONAL CLASSIFICATION |          |                    |                                   |  |  |  |  |  |  |
|                              | /        |                    |                                   |  |  |  |  |  |  |
|                              | /        |                    |                                   |  |  |  |  |  |  |
|                              | /        |                    |                                   |  |  |  |  |  |  |
|                              | /        |                    |                                   |  |  |  |  |  |  |
|                              | /        |                    |                                   |  |  |  |  |  |  |

^ Continued on Issue Slip Inside File Jacket

### INDEX OF CLAIMS

✓ ..... Rejected - (Through numeral) ... Canceled N ..... Non-elected A ..... Appeal  
 = ..... Allowed + ..... Restricted I ..... Interference O ..... Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1     |       | 357      |      |
| 2     |       | 0        |      |
| 3     |       | 1        |      |
| 4     |       | 1        |      |
| 5     |       | ✓        |      |
| 6     |       | ✓        |      |
| 7     |       | 0        |      |
| 8     |       | 1        |      |
| 9     |       | ✓        |      |
| 10    |       | 1        |      |
| 11    |       | 1        |      |
| 12    |       | 1        |      |
| 13    |       | 1        |      |
| 14    |       | 1        |      |
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| 18    |       | 1        |      |
| 19    |       | 1        |      |
| 20    |       | 1        |      |
| 21    |       | 1        |      |
| 22    |       | 0        |      |
| 23    |       | 1        |      |
| 24    |       | 1        |      |
| 25    |       | ✓        |      |
| 26    |       | 0        |      |
| 27    |       | ✓        |      |
| 28    |       | 0        |      |
| 29    |       | 0        |      |
| 30    |       | ✓        |      |
| 31    |       | ✓        |      |
| 32    |       | 0        |      |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 9 actions staple additional sheet here

5770 (111) 305/12